

**MULTIPLE DEPENDENT CLAIM
FREE CALCULATION SHEET**

0/01

6.6-880/01

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)			
APPLICANT(S)	FILED DATE	10/088499	
CLAIMS			
AS FILED	IND.	DEP.	
AFTER 1st AMENDMENT	IND.	DEP.	
AFTER 2nd AMENDMENT	IND.	DEP.	
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TOTAL IND.			
TOTAL DEP.			
TOTAL CLAIMS			